

Crosswalk Management System

Report	REPORT CROSSWALK TO STATE
Filename	Acrobat PDFWriter
Run by	CWMS
Report Date	14-AUG-01 07:09

Crosswalk Report

CWMS

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Status : FN Substance Abuse and Mental Health Services Administration

Media ID : DHS1641A/B

Office of Applied Studies

Start Date : 01-JAN-90

End Date :

Follow-up :

District of Columbia's Treatment Episode Data Set

Version : 1

K = Key Field

System

District of Columbia

Item

Item

No. Treatment Episode Data Set

Value

State System Data

1	System Transaction Type	-	Sytem Transaction Type Added to Each Record
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K 2	State Code	DC	FIPS Code Added To Each Record
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3	Reporting Date	-	Month and Year of Submission Added to Each Record
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K = Key Field
Item

Minimum
Item

District of Columbia

No. Treatment Episode Data Set

Value

State System Data

K 1 Provider ID

11

Clinic ID

K 2 Client ID

12

Client ID

K 3 Co-Dependent/Collateral at Admission

13

Co-Dependent/Collateral

1 Yes

1 Yes

2 No

2 No

K 4 Client Transaction Type

14

Client Transaction Type

A Initial Admission

A Admission

T Transfer/Change in Service

T Transfer/Change in Service

K 5 Date of Admission

15

Date of Admission

6 Number of Prior Treatments

17

Number of Prior Treatment Episodes in any Drug or Alcohol Treatment Pg

0 0

0 0

1 1

1 1

2 2

2 2

3 3

3 3

4 4

4 4

5 Or More

5 5 or more

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District of Columbia

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Value

State System Data

7 Principal Source of Referral

18

Principal Source of Referral

01 Individual (self)
02 Alcohol/Drug Abuse Provider
03 Other Health Care Provider
04 School (education)
05 Employer/EAP
06 Other Community Referral
07 Court/Criminal Justice/DUI/DWI
97 Unknown

01 Individual (Includes Self)
02 Alcohol/Drug Abuse Provider
03 Other Health Care Provider
04 School (Educational)
05 Employer/EAP
06 Other Community Referral
07 Court Criminal Justice
Referral/DUI/DWI
97 Unknown

8 Date of Birth

19

Date of Birth

9 Sex

20

Sex

1 Male
2 Female
7 Unknown
7 Unknown

01 Male
02 Female
20 Other
97 Unknown

10 Race

21

Race

01 Alaskan Native
02 American Indian
03 Asian or Pacific Islander
04 Black
05 White
20 Other
97 Unknown
13 Asian
23 Native Hawaiians or Other Pacific
Islanders

01 Alaskan Native
02 American Indian
03 Asian or Pacific Islander
04 Black
05 White
20 Other
97 Unknown

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Item

Minimum
Item

District of Columbia

No. Treatment Episode Data Set Value State System Data

11 Ethnicity

01 Puerto Rican
02 Mexican
03 Cuban
04 Other Hispanic
05 Not of Hispanic Origin
97 Unknown

22 Ethnicity

01 Puerto Rican
02 Mexican
03 Cuban
04 Other Hispanic
05 Not of Hispanic Origin
97 Unknown

12 Education

01- Highest School Grade in Number
25 of Years (12=GED)
00 Less Than One Grade Completed
97 Unknown

23 Education At Time of Admission

00-25 00-25
00-25 00-25
97 Unknown

13 Employment Status

01 Full Time
02 Part Time
03 Unemployed
04 Not in Labor Force
97 Unknown

24 Employment Status

01 Employed Full Time At Least 35 Hours
Per Week Including Armed Forces
02 Employed Part Time Less Than 35
Hours Per Week
03 Unemployed Looking For Work Within
Past 30 Days
04 Not In Labor Force
97 Unknown

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Minimum

District of Columbia

Item

Item

Value

State System Data

No. Treatment Episode Data Set

14	Substance Problem Codes	25,29, 33	Substance Problem Code, Primary, Secondary, Tertiary
01	None	01	None
02	Alcohol	02	Alcohol
03	Cocaine, Crack	03	Cocaine/Crack
04	Marijuana, Hashish, THC	04	Marijuana, Hashish
05	Heroin	05	Heroin
06	Non-Prescription Methadone	06	Non-Prescription Methadone
07	Other Opiates and Synthetics	07	Other Opiates and Synthetics
08	PCP	08	PCP
09	Other Hallucinogens	09	Other Hallucinogens
10	Methamphetamines	10	Methamphetamine
11	Other Amphetamines	11	Other Amphetamines
12	Other Stimulants	12	Other Stimulants
13	Benzodiazepines	13	Benzodiazepines
14	Other Tranquilizers	14	Other Tranquilizers
15	Barbiturates	15	Barbiturates
16	Other Sedatives or Hypnotics	16	Other Sedatives or Hypnotics
17	Inhalants	17	Inhalants
18	Over-the-Counter	18	Over The Counter
20	Other	20	Other
97	Unknown	97	Unknown

15	Usual Route of Administration	26,30, 34	Usual Route of Administration Primary, Secondary, Tertiary
01	Oral	01	Oral
02	Smoking	02	Smoking
03	Inhalation	03	Inhalation
04	Injection (IV or intramuscular)	04	Injection (IV or Intramuscular)
20	Other	20	Other
97	Unknown	97	Unknown

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Item		Item	Value	State System Data
No.	Treatment Episode Data Set			
16	Frequency of Use	27,31, 35	Frequency of Use	
01	No past month use	01	No Past Month Use	
02	1-3 times in past month	02	1-3 Times In Past Month	
03	1-2 times per week	03	1-2 Times Per Week	
04	3-6 times per week	04	3-6 Times Per Week	
05	Daily	05	Daily	
97	Unknown	97	Unknown	
17	Age of First Use or Alcohol Intoxication	28,32, 36	Age of First Use or Alcohol Intoxication	
00	Newborn with substance abuse problem	00	Newborn	
00-96	Range of Age	00-96	-	
97	Unknown	97	Unknown	
K 18	Services	16	Services	
01	Hospital Inpatient	01	Detoxification, 24 Hour Service-Hospital Inpatient	
02	Free-standing Residential	02	Detoxification, 24 Hour Service- Free Standing Residential	
03	Hospital (other than detox)	03	Rehabilitation/Residential Hospital (Other Than Detoxification)	
04	Short-term, <=30 days	04	Rehabilitation/Residential Short Term (30 Days or Less)	
05	Long-term, >30 days	05	Rehabilitation/Residential Long Term (Over 30 Days)	
06	Intensive Outpatient	06	Ambulatory - Intensive Outpatient	
07	Outpatient	07	Ambulatory - Non-Intensive Outpatient	
08	Detoxification	08	Ambulatory - Detoxification	
08	Detoxification	09	Urine Surveillance	

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Item

Item

No. Treatment Episode Data Set

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State System Data

19	Use of Methadone Planned as Part of Treatment	37	Use of Methadone Planned As Part of Treatment
1	Yes	1	Yes
2	No	2	No

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Optional

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No.	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	38	Primary Detail Drug Code	
	0201 Alcohol		0201 Alcohol	
	0301 Crack		0301 Crack	
	0302 Other Cocaine		0302 Other Cocaine	
	0401 Marijuana/Hashish		0401 Marijuana/Hashish	
	0501 Heroin/Morphine		0501 Heroin/Morphine	
	0601 Methadone		0601 Methadone	
	0701 Codeine		0701 Codeine	
	0702 D-Propoxyphene		0702 D-Propoxyphene	
	0703 Oxycodone		0703 Oxycodone	
	0704 Meperidine HCL		0704 Meperidine HCL	
	0705 Hydromorphone		0705 Hydromorphone	
	0706 Other Narcotic Analgesics		0706 Other Narcotic Analgesics	
	0707 Pentazocine		0707 Pentazocine	
	0801 PCP or PCP Combinations		0801 PCP or PCP Combinations	
	0901 LSD		0901 LSD	
	0902 Other Hallucinogens		0902 Other Hallucinogens	
	1001 Methamphetamine/Speed		1001 Methamphetamine/Speed	
	1101 Amphetamine		1101 Amphetamine	
	1102 Methylphenidate		1102 Methylphenidate	
	1201 Other Stimulants		1201 Other Stimulants	
	1301 Alprazolam		1301 Alprazolam	
	1302 Chlordiazepoxide		1302 Chlordiazepoxide	
	1303 Clorazepate		1303 Clorazepate	
	1304 Diazepam		1304 Diazepam	
	1305 Flurazepam		1305 Flurazepam	
	1306 Lorazepam		1306 Lorazepam	
	1307 Triazolam		1307 Triazolam	
	1308 Other Benzodiazepine		1308 Other Benzodiazepine	
	1401 Meprobamate		1401 Meprobamate	
	1403 Other Tranquilizer		1403 Other Tranquilizer	
	1501 Phenobarbital		1501 Phenobarbital	
	1502 Secobarbital/Amobarbital		1502 Secobarbital/Amobarbital	

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Optional

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No.	Treatment Episode Data Set	Item	Value	State System Data
1	Detail Drug Code, Primary	38	Primary Detail Drug Code	
	1503 Secobarbital		1503 Secobarbital	
	1601 Ethchlorvynol		1601 Ethchlorvynol	
	1602 Glutethimide		1602 Glutethimide	
	1603 Methaqualone		1603 Methaqualone	
	1604 Other Non-Barbiturate Sedatives		1604 Other Non-Bartiturate Sedatives	
	1605 Other Sedatives		1605 Other Sedatives	
	1701 Aerosols		1701 Aerosols	
	1702 Nitrites		1702 Nitrites	
	1703 Other Inhalants		1703 Other Inhalants	
	1704 Solvents		1704 Solvents	
	1705 Anesthetics		1705 Anesthetics	
	1801 Diphenhydramine		1801 Diphenhydramine	
	2001 Dephenylhydantoin Sodium		2001 Diphenylhydantoin Sodium	
	2002 Other Drugs		2002 Other Drugs	
	1103 Methyleneioxymethamphetamine (MDMA, Ecstasy)			
	1606 Flunitrazepam (Rohypnol)			
	1607 GHB/GBL (gamma- hydroxybutyrate, gamma- butyrolactone)			
	1608 Ketamine (Special K)			
	1609 Clonazepam (Klonopin, Rivotril)			
2	Detail Drug Code, Secondary	39	Secondary Detailed Drug Code	
3	Detail Drug Code, Tertiary	40	Tertiary Detail Drug Code	
4	Substance Abuse Diagnosis Based on DSM III-R Criteria	41	Substance Abuse Diagnosis Based On DSM III R Criteria	
	###. DSM III-R Category		###.# DSM III-R Criteria	
	##		#	
	999. Unknown		999.9 Unknown	

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Optional

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Item No.	Treatment Episode Data Set	Item	Value	State System Data
5	Psychiatric Problem in Addition to Alcohol or Drug Problem	42	Psychiatric Problem In Addition To Alcohol Or Drug Problem	
1	Yes		1	Yes
2	No		2	No
6	Pregnant at Time of Admission	43	Pregnant At Time Of Admission	
1	Yes		1	Yes
2	No		2	No
7	Veteran Status	44	Veteran Status	
1	Yes		1	Yes
2	No		2	No
8	Living Arrangements	45	Living Arrangements	
01	Homeless		01	Homeless
02	Dependent Living		02	Dependent Living
03	Independent Living		03	Independent Living
97	Unknown		97	Unknown
9	Primary Source of Income or Support	46	Primary Source of Income or Support	
01	Wages/Salary		01	Wages/Salary
02	Public Assistance		02	Public Assistance
03	Retirement/Pension		03	Retirement/Pension
04	Disability		04	Disability
20	Other		20	Other
21	None		21	None
97	Unknown		97	Unknown

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Optional

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No.	Treatment Episode Data Set	Item	Value	State System Data
10	Health Insurance	47	Health Insurance (May not cover alcohol/drug treatment)	
01	Private Insurance	01	Private Insurance	
02	Blue Cross/Blue Shield	02	Blue Cross/Blue Shield	
03	Medicare	03	Medicare	
04	Medicaid	04	Medicaid	
06	Health Maintenance Organization (HMO)	06	Health Maintenance Organization (HMO)	
20	Other	20	Other (e.g. CHAMPUS)	
21	None	21	None	
97	Unknown	97	Unknown	
11	Expected Primary Source of Payment for This Treatment Episode	48	Expected Primary Source of Payment For This Treatment Episode	
01	Self-Pay	01	Self Pay	
02	Blue Cross/Blue Shield	02	Blue Cross/Blue Shield	
03	Medicare	03	Medicare	
04	Medicaid	04	Medicaid	
05	Other Government Payments	05	Other Government Payments	
06	Worker's Compensation	06	Worker's Compensation	
07	Other Health Insurance Companies	07	Other Health Insurance Companies	
08	No Charge	08	No Charge	
09	Other	09	Other	
97	Unknown	97	Unknown	

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Optional

District of Columbia

No.	Treatment Episode Data Set	Item	Value	State System Data
12	Detailed Not in Labor Force	49	Detailed Not In Labor Force	
01	Homemaker	01	Homemaker	
02	Student	02	Student	
03	Retired	03	Retired	
04	Disabled	04	Disabled	
05	Inmate of Institution	05	Inmate of Institution	
06	Other	06	Other	
97	Unknown	97	Unknown	
13	Detailed Criminal Justice Referral Categories	50	Detailed Criminal Justice Referral	
01	State/Federal Court	01	State/Federal Court	
02	Formal Adjudication Process (other than above)	02	Formal Adjudication Process (Other than State/Federal Court)	
03	Probation/Parole	03	Probation/Parole	
04	Recognized Legal Entity (other than above)	04	Other Recognized Legal Entity	
05	Diversiory Program/TASC	05	Dieversionary Progrm/TASC	
06	Prison	06	Prison	
07	DUI/DWI	07	DUI/DWI	
08	Other	08	Other	
97	Unknown	97	Unknown	
14	Marital Status	51	Marital Status	
01	Never Married	01	Never Married	
02	Now Married or Cohabiting	02	Now Married	
03	Separated (legally or otherwise absent)	03	Seperated	
04	Divorced	04	Divorced	
05	Widowed	05	Widowed	
97	Unknown	97	Unknown	

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Version : 1

K = Key Field

Optional

District of Columbia

Item

Item

Value

State System Data

No. Treatment Episode Data Set

15 Time Waiting to Enter Treatment

52 Days Waiting To Enter Treatment

Crosswalk Management System

REPORT CROSSWALK TO STATE

End of Report